

# Missvisit

## Missed Visit Information

1. Date of scheduled study visit:

\_\_\_\_\_ (mm-dd-yyyy)

2. Reason for missed visit (check all that apply):

- Participant ill
- Participant out of town
- Participant/Parent refused
- Participant has permanently moved from the area
- Unable to contact participant/parent
- Other

If other, specify:

\_\_\_\_\_

3. Missed Visit interventions/outcomes (check all that apply):

- Telephoned participant's family
- Mailed reminder card
- Rescheduled study visit
- Other

Date of rescheduled study visit:

\_\_\_\_\_ (mm-dd-yyyy)

If other, specify:

\_\_\_\_\_

## Incomplete Visit Information

4. Reason visit procedure(s) not completed (check all that apply):

Participant ill, unable to complete assessment(s)

- Yes
- No

Please explain:

\_\_\_\_\_

Participant refused assessment(s)

- Yes
- No

Please explain:

\_\_\_\_\_

Parent(s) refused assessment(s)

- Yes
- No

Please explain:

\_\_\_\_\_

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Parent(s) could not stay for the entire evaluation  Yes  
 No

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Parent(s) were late for the appointment  Yes  
 No

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Other  Yes  
 No

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If other, specify: \_\_\_\_\_

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5. Assessment(s) rescheduled?  Yes  
 No

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Date of rescheduled study visit: \_\_\_\_\_  
(mm-dd-yyyy)

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Assessments to be done at rescheduled visit (check all that apply):

- Questionnaires
- Physical Examination
- Spirometry
- Bronchodilator response
- Lung volumes
- Blood draw
- Polysomnogram
- Attempted to collect interview data by phone
- Attempted to gain participant/parent cooperation
- Other

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If other, specify: \_\_\_\_\_